

Department of Health and Human Services

Supported Employment Fidelity Response

CMHC:	Mondanock Family Services
DHHS Response Date:	12/1/2016, 2 nd response 1/24/17

Executive Summary:

Monadnock Family Services (MFS) provided a Supported Employment (SE) self-fidelity report. Based on this report, it is not clear that the team followed the guidelines in a manner to complete the ratings for the Fidelity review as described in the Supported Employment Evidence-Based Practices Kit, *Evaluating Your Program* guide. Specifically, the ratings on some of the Fidelity report items are not supported in the comments text. Please update the review with text to support the ratings, update the Areas of Focus section of the report, and then resubmit. BMH will then review and provide feedback. Below are some examples that can guide your resubmission.

After completing your review, please rate each item according to the Fidelity scale anchors and indicate the basis for your rating. For example, in the Staffing section, Item 1, Caseload Size, MFS rated the team 4, but did not provide an average caseload size, thus that score is not substantiated. MFS should indicate the number of consumers per SE specialist during the past 6 months and rate the team accordingly. Another example is Item 2, Vocational Services Staff. The item is rated a 4, meaning that SE staff are delivering SE 90—95% of the time, but that is not substantiated in the comments section. For this item, staff schedules and/or activity logs should be reviewed. The report should indicate the average percentage of time SE staff provides SE services and then rate the team accordingly. Similar items that lack the details/specificity or computational backup to substantiate ratings include:

- Organization: Items 1 & 3 (the information provided supports a rating of 3 rather than 4)
- Services: Items: 4, 5, 8, 9, 10, 11, 12, & 13.

After updating the review and ratings, please edit your Areas of Focus section. MFS does not have to address every Fidelity item in this section. Rather, please provide a realistic plan with activities you intend to undertake to maintain and improve your SE service in the coming year. Our recommendation would be to prioritize areas where there is a score of 3 or less – according to the MFS plan reviewed here that would be Organization Item 3, Collaboration with VR, and Services Item 6, Individualized Job Search, and then to address any additional areas that would allow for prompt measureable success.

Please review the toolkit instructions for completing fidelity reviews and scoring items, revise your review and report, and resubmit to Michele Harlan at BMHS by December 16.

Thank you for the 2nd response on 12/9/2016 with an updated, corrected and amended CMHC Supported Employment Fidelity Report originally submitted 10/21/2016.

Upon review we have determined that Monadnock Family Services is in compliance with the purpose and intent of the SE self-fidelity process. Congratulations on your “Good Fidelity” rating! We have updated the

DHHS response herein accordingly.

The text documenting support for ratings of two items did not align with what would be expected for rating those items, and should be revisited by the MFS review team (see our comments for items 4. Rapid Search and 14. Engagement, below).

We did note that the Areas of Focus section in your 12/9/2016 report appears to be unchanged from the initial report. We commend you for the detailed, comprehensive plan. Our recommendation remains to prioritize areas where there is a score of 3 or less. Those three items according to the 12/9/16 report submitted are:

- Staffing: Item 1. Caseload Size (First item in your Area of Focus)
- Organization: Item 3. Collaboration with VR. (Item 4 in your Area of Focus)
- Services: Item 6. Job development – Frequent employer contact (Item 9 in your Area of Focus)

We believe that through prioritizing the items that together MFS and the BMHS will focus on some of the key areas for improvement, support improved fidelity, and promote successful change. These prioritized Areas of Focus will be the basis for any technical assistance and follow-up activities with BMHS.

Out of a possible 125 points the CMHC reported a score of: **113 – Good Fidelity**

Improvement Plan Required: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	No Further Action Needed.	Resubmit: Address items: _____ _____
Score Range	Fidelity Level	
115 – 125	Exemplary Fidelity	
100 – 114	Good Fidelity	
74 – 99	Fair Fidelity	
73 and below	Not Supported Employment	

Staffing

1. Caseload Size

Employment specialists have individual employment caseloads. The maximum caseload for any full-time employment specialist is 20 or fewer clients.	Rating = ____ out of 5 Rating = 3 out of 5
DHHS Response:	Agree – Acceptable recommendation. Consider prioritizing as an Area of Focus.

2. Vocational Services Staff

Employment specialists provide only employment services.	Rating = ____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree

3. Vocational Generalists

Each employment specialist carries out all phases of employment services, including intake, engagement, assessment, job placement, job coaching, and follow along supports before step down to a less intensive employment support from another MH practitioner.	Rating = ____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree

Organization

1. Integration of rehabilitation with mental health treatment through team assignment.

Employment specialists are part of up to 2 mental health treatment teams from which at least 90% of the employment specialist's caseload is comprised.	Rating = ____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree

2. Integration of rehabilitation with mental health treatment through frequent team contact.

Employment specialists actively participate in weekly mental health treatment team meetings (not replaced by administrative meetings) that discuss individual clients and their employment goals with shared decision-making. Employment specialist's office is in close proximity to (or shared with) their mental health treatment team members. Documentation of mental health treatment and employment services are integrated in a single client chart. Employment specialists help the team think about employment for people who haven't yet been referred to supported employment services.	Rating = ____ out of 5 Rating = 4 out of 5
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✓ if applicable <input type="checkbox"/>	Employment specialist attends weekly mental health treatment team meetings.
✓ if applicable <input type="checkbox"/>	Employment specialist participates actively in treatment team meetings with shared decision-making.
✓ if applicable <input type="checkbox"/>	Employment services documentation (i.e., vocational assessment/profile, employment plan, progress notes) is integrated into client's mental health treatment record.
✓ if applicable <input type="checkbox"/>	Employment specialist's office is in close proximity to (or shared with) his or her mental health treatment team members.
✓ if applicable <input type="checkbox"/>	Employment specialist helps the team think about employment for people who haven't yet been referred to supported employment services.
DHHS Response:	Agree – Recommendations appear appropriate.

3. Collaboration between employment specialists and Vocational Rehabilitation.

Employment specialists and VR counselors have frequent contact for the purpose of discussing shared clients and identifying potential referrals.	Rating = ____ out of 5 Rating = 3 out of 5
DHHS Response:	Agree – Acceptable recommendation. Consider prioritizing as an Area of Focus.

4. Vocational Unit.

At least 2 full-time employment specialists and a team leader comprise the employment unit. They have weekly client-based group supervision based on the supported employment model in which strategies are identified and job leads are shared. They provide coverage for each other's caseload when needed.	Rating = ____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree

5. Role of employment supervisor.

Supported employment unit is led by a supported employment team leader. Employment specialists' skills are developed and improved through outcome-based supervision. All five key roles of the employment supervisor are present.	Rating = ____ out of 5 Rating = 4 out of 5
✓ if applicable <input type="checkbox"/>	One full-time supervisor is responsible for no more than 10 employment specialists. The supervisor does not have other supervisory responsibilities. (Program leaders supervising fewer than 10 employment specialists may spend a percentage of time on other supervisor activities on a prorated basis.)
✓ if applicable <input type="checkbox"/>	Supervisor conducts weekly supported employment supervision designed to review client situations and identify new strategies and ideas to help clients in their work lives.
✓ if applicable <input type="checkbox"/>	Supervisor communicates with mental health treatment team leaders to ensure that services are integrated, to problem solve programmatic issues and to be a champion for the value of work. Attends a meeting for each mental health treatment team on a quarterly basis.
✓ if applicable <input type="checkbox"/>	Supervisor accompanies employment specialists who are new or having difficulty with job development, in the field monthly to improve skills by observing, modeling and giving feedback on skills, e.g., meeting employers for job development.
✓ if applicable <input type="checkbox"/>	Supervisor reviews current client outcomes with employment specialists and sets goals to improve program performance at least quarterly.

DHHS Response:	Agree – Recommendations appear appropriate.
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6. Zero exclusion criteria

<p>All clients interested in working have access to supported employment services regardless of job readiness factors, substance abuse, symptoms, history of violent behavior, cognition impairments, treatment non-adherence, and personal presentation. These apply during supported employment services, too. Employment specialists offer to help with another job when one has ended regardless of the reason that the job ended or the number of jobs held. If VR has screening criteria, the mental health agency does not use them to exclude anybody. Clients are not screened out formally or informally.</p>	<p>Rating = ____ out of 5</p> <p>Rating = 5 out of 5</p>
DHHS Response:	Agree

7. Agency focus on competitive employment.

<p>Agency promotes work through multiple strategies. Agency intake includes questions about interest in competitive employment. Agency displays written postings (e.g., brochures, bulletin boards, posters) about employment and supported employment services. The focus should be with the agency programs that provide services to adults with severe mental illness. Agency supports ways for clients to share work stories with other clients and staff. Agency measures rate of competitive employment and shares this information with agency leaders and staff.</p>	<p>Rating = ____ out of 5</p> <p>Rating = 4 out of 5</p>
✓ if applicable <input type="checkbox"/>	Agency intake includes questions about interest in employment
✓ if applicable <input type="checkbox"/>	Agency includes questions about interest in employment on all annual (or semi-annual) assessment or treatment plan reviews.
✓ if applicable <input type="checkbox"/>	Agency displays written postings (e.g., brochures, bulletin boards, posters) about working and supported employment services, in lobby and other waiting areas
✓ if applicable <input type="checkbox"/>	Agency supports ways for clients to share work stories with other clients and staff (e.g., agency-wide employment recognition events, in-service training, peer support groups, agency newsletter articles, invited speakers at client treatment groups, etc.) at least twice a year.
✓ if applicable <input type="checkbox"/>	Agency measures rate of competitive employment on at least a quarterly basis and shares outcomes with agency leadership and staff.
DHHS Response:	Agree – Recommendations appear appropriate.

8. Executive Team Support for Supported Employment

Agency executive team members (e.g., CEO/Executive Director, Chief Operating Officer, QA Director, Chief Financial Officer, Clinical director, Medical Director, Human Resource Director) assist with supported employment implementation and sustainability. All five key components of executive team are present.	Rating = _____ out of 5 Rating = 4 out of 5
✓ if applicable <input type="checkbox"/>	Executive Director and Clinical Director demonstrate knowledge regarding the principles of evidence-based supported employment.
✓ if applicable <input type="checkbox"/>	Agency QA process includes an explicit review of the IPS SE program, or components of the program, at least every 6 months through the use of the Supported Employment Fidelity Scale, or until achieving high fidelity, and at least yearly thereafter. Agency QA process uses the results of the fidelity assessment to improve IPS SE implementation and sustainability.
if applicable <input type="checkbox"/>	At least one member of the executive team actively participates at IPS SE leadership team (steering committee) meetings that occur at least every six months for high fidelity programs and at least quarterly for programs that have not yet achieved high fidelity. Steering committee is defined as a diverse group of stakeholders charged with reviewing fidelity, program implementation, and the service delivery system. Committee develops written action plans aimed at developing or sustaining high fidelity services.
if applicable <input type="checkbox"/>	The agency CEO/Executive Director communicates how IPS SE services support the mission of the agency and articulates clear and specific goals for SE and/or competitive employment to all agency staff during the first six months and at least annually (i.e., SE kickoff, all-agency meetings, agency newsletters, etc.). This item is not delegated to another administrator.
✓ if applicable <input type="checkbox"/>	SE program leader shares information about EBP barriers and facilitators with the executive team (including the CEO) at least twice each year. The executive team helps the program leader identify and implement solutions to barriers.
DHHS Response:	Agree – Recommendations appear appropriate.

Services

1. Work incentives planning

All clients are offered assistance in obtaining comprehensive individualized work incentives planning (benefits planning) before starting a new job and assistance accessing work incentives planning thereafter when making decisions about changes in work hours and pay. Work incentives planning includes SSA benefits, medical benefits, medication subsidies, housing subsidies, food stamps, spouse and dependent children benefits, past job retirement benefits and any other source of income. Clients are provided information and assistance about reporting earnings to SSA, housing programs, VA programs, etc., depending on the person's benefits	Rating = _____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree

2. Disclosure

Employment specialists provide clients with accurate information and assist with evaluating their choices to make an informed decision regarding what is revealed to the employer about having a disability.		Rating = _____ out of 5 Rating = 5 out of 5
✓ if applicable <input type="checkbox"/>	Employment specialists do not require all clients to disclose their psychiatric disability at the work site in order to receive services..	
✓ if applicable <input type="checkbox"/>	Employment specialists offer to discuss with clients the possible costs and benefits (pros and cons) of disclosure at the work site in advance of clients disclosing at the work site. Employment specialists describe how disclosure relates to requesting accommodations and the employment specialist's role communicating with the employer.	
✓ if applicable <input type="checkbox"/>	Employment specialists discuss specific information to be disclosed (e.g., disclose receiving mental health treatment, or presence of a psychiatric disability, or difficulty with anxiety, etc.) and offers examples of what could be said to employers.	
✓ if applicable <input type="checkbox"/>	Employment specialists discuss disclosure on more than one occasion (e.g., if clients have not found employment after 2 months or if clients report difficulties on the job).	
DHHS Response:		Agree

3. Ongoing, work-based vocational assessment

Initial vocational assessment occurs over 2-3 sessions and is updated with information from work experiences in competitive jobs. A vocational profile form that includes information about preferences, experiences, skills, current adjustment, strengths, personal contacts, etc. is filed in the client's clinical chart and is updated with each new job experience. Aims at problem solving using environmental assessments and consideration of reasonable accommodations. Sources of information include client, treatment team, clinical records, and with the client's permission, from family members and previous employers.		Rating = _____ out of 5 Rating = 4 out of 5
DHHS Response:		Agree – Recommendations appear appropriate.

4. Rapid search for competitive job.

Initial employment assessment and first face-to-face employer contact by the client or the employment specialist about a competitive job occurs within 30 days (one month) after program entry.		Rating = _____ out of 5 Rating = 5 out of 5
DHHS Response:	This item is about face-to-face contacts with employers for SE clients. From the text in the comments section, it appears that almost half of clients were recorded as having face-to-face contact with an employer on the same day that the SE service was initiated (contact can be either client or SE worker on behalf of the client). It seems unusual that these contacts could be arranged so quickly and that they would occur prior to any assessment and goal setting. Please check the manual regarding what this item is measuring and re-evaluate the SE team. At this point, DHHS cannot confirm this rating.	

5. Individualized job search

Employment specialists make employer contacts are aimed at making a good job match based on clients' preferences (relating to what each person enjoys and their personal goals) and needs (including experience, ability, symptomatology, health, etc.) rather than the job market (i.e., those jobs that are readily available). An individualized job search plan is developed and updated with information from the vocational assessment/profile form and new job/educational experiences.	Rating = _____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree

6. Job development-Frequent employer contact

Each employment specialist makes at least 6 face-to-face employer contacts per week on behalf of clients looking for work. (Rate for each then calculate average and use the closest scale point.) An employer contact is counted even when an employment specialist meets an employer twice in one week, and when the client is present or not present. Client specific and generic contacts are included. Employment specialists use a weekly tracking form to document employer contacts and the form is reviewed by the supervisor on a weekly basis.	Rating = _____ out of 5 Rating = 2 out of 5
DHHS Response:	Agree – Acceptable recommendation. Consider prioritizing as an Area of Focus.

7. Job development-Quality of employer contact

Employment specialists build relationships with employers through multiple visits in person that are planned to learn the needs of the employer, convey what the SE program offers to the employer, and describe client's strengths that are a good match for the employer.	Rating = _____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree

8. Diversity of jobs developed.

Employment specialists assist clients in obtaining different types of jobs.	Rating = _____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree

9. Diversity of employers.

Employment specialists assist clients in obtaining jobs with different employers.		Rating = ____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree	

10. Competitive jobs.

Employment specialists provide competitive jobs options that have permanent status rather than temporary or time-limited status, (e.g., transitional employment positions). Competitive jobs pay at least minimum wage, are jobs that anyone can apply for and are not set aside for people with disabilities. (Seasonal jobs and jobs from temporary agencies that other community members use are counted as competitive jobs.)		Rating = ____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree	

11. Individualized follow-along supports

Clients receive different types of support for working a job that are based on the job, client preferences, work history, needs, etc. Supports are provided by a variety of people including treatment team members (i.e., medication changes, social skills training, encouragement), family, friends, co-workers (i.e., natural supports) and employment specialist. Employment specialist also provides employer support (e.g., educational information, job accommodations) at client's request. Employment specialists offer help with career development, i.e., assistance with education, a more desirable job, or more preferred job duties.		Rating = ____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree	

12. Follow-along supports – Time unlimited

Employment Specialists have face-to-face contact within 1 week before starting a job, within 3 days after starting a job, weekly for the first month, and at least monthly for a year or more, on average, after working steadily and desired by clients. Clients are transitioned to step down job supports from a mental health worker following steady employment. Employment specialists contact clients within 3 days of learning about a job loss.		Rating = ____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree	

13.Community-based services

Employment services such as engagement, job finding and follow-along supports are provided in natural community settings by all employment specialists. (Rate each employment specialist based upon their total weekly scheduled work hours then calculate the average and use the closest scale point.).	Rating = _____ out of 5 Rating = 5 out of 5
DHHS Response:	Agree – No further action required.

14.Assertive engagement and outreach by integrated team.

Service termination is not based on missed appointments or fixed time limits. Systematic documentation of outreach attempts. Engagement and outreach attempts made by integrated team members. Multiple home/community visits. Coordinated visits by employment specialist with integrated team member. Connect with family, when applicable. Once it is clear that the client no longer wants to work or continue in SE services, the team stops outreach.	Rating = _____ out of 5 Rating = 5 out of 5
DHHS Response:	The comments for this item do not address the rating anchors – in order to earn a rating of 5, the reviewer should observe that the team uses all 6 strategies for engagement and outreach. Please review for evidence of use of a diversity of strategies and re-rate the team. At this point, DHHS cannot confirm this rating.